

Leka, Kathy

From: VonDeBur, Joe
Sent: Thursday, March 03, 2005 3:01 PM
To: Leka, Kathy
Subject: FW: T01-0052

289961H



genoa 006.pdf

More shtuff

-----Original Message-----

From: Tom.Zeinz@cn.ca [mailto:Tom.Zeinz@cn.ca]
Sent: Wednesday, February 23, 2005 5:34 PM
To: VonDeBur, Joe
Subject: T01-0052

Joe,

This is in regards to a notice we received from the ICC's Director of Processing and Information dated February 16, 2005, saying we needed to file a U.S. DOT AAR Crossing Inventory Form for this completed project. The project was to replace the bridge which carries the Chicago Central and Pacific Railroad's Freeport Subdivision track over Genoa Road at Genoa, Illinois.

Attached in "pdf" format is the requested DOT Update Form. The only change is the Mile Post location (the subway was reconstructed on a new alignment, shifting the centerline approximately 340 feet westerly along the centerline of track). I would appreciate if you would pass this to the Director of Processing's Office or, if I should handle differently, please let me know..

Tom Zeinz

U.S. DOT CROSSING INVENTORY FORM

DEPARTMENT OF TRANSPORTATION
FEDERAL RAILROAD ADMINISTRATION (FRA)

OMB Control No. 2130-0017
Expires: 3/31/2003

A. Initiating Agency <input checked="" type="checkbox"/> Railroad <input type="checkbox"/> State	B. Crossing Number (max. 7 char.) <div style="font-size: 1.2em; font-weight: bold;">289961H</div>	C. Reason for Update <input checked="" type="checkbox"/> Changes in Existing Data <input type="checkbox"/> New Crossing <input type="checkbox"/> Closed Crossing or Abandoned	D. Effective Date (MM/DD/YYYY) <div style="font-weight: bold;">02/22/2005</div>
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Part I: Location and Classification Information

1. Railroad Oper. Co. (code (max. 4 char.) or name) <div style="font-weight: bold;">CC</div>		2. State (2 char.) <div style="font-weight: bold;">IL</div>		3. County (max. 20 char.) <div style="font-weight: bold;">DE KALB</div>	
4. Railroad Division or Region (max. 14 char.) <div style="font-weight: bold;">CENTRAL</div>		5. Railroad Subdivision or District (max. 14 char.) <div style="font-weight: bold;">FREEPORT</div>		6. Branch or Line Name (max. 15 char.) <div style="font-weight: bold;">MAIN</div>	
7. RR Milepost (max. 7 char.) (nnnnn.nn) <div style="font-weight: bold;">0062.64</div>					
8. RR I.D. No. (max. 10 char.) <div style="font-weight: bold;">W 62.64</div>		9. Nearest RR Timetable Station (max. 15 char.) (optional) <div style="font-weight: bold;">HART</div>		10. Parent RR (max. 4 char.) (if applicable) <div style="font-weight: bold;">CN</div>	
11. Crossing Owner (RR or Company name) (if applicable)					
12. City (max. 16 char.) (check one) <input type="checkbox"/> In <input checked="" type="checkbox"/> Near <div style="font-weight: bold;">GENOA</div>			13. Street or Road Name (max. 17 char.) <div style="font-weight: bold;">BELVIDERE STREET</div>		
14. Highway Type & No. (max. 7 char.) <div style="font-weight: bold;">FAS 37</div>			15. ENS Sign Installed (1-800) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
16. Quiet Zone <input checked="" type="checkbox"/> No <input type="checkbox"/> Partial <input type="checkbox"/> 24 hr <input type="checkbox"/> Unknown			17. Crossing Type (choose one only) <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Pedestrian		
18. Crossing Position <input type="checkbox"/> At Grade <input type="checkbox"/> RR Under <input checked="" type="checkbox"/> RR Over			19. Type of Passenger Service <input type="checkbox"/> AMTRAK <input type="checkbox"/> AMTRAK & Other <input type="checkbox"/> Other <input type="checkbox"/> None		
20. Average Passenger Train Count Per Day <div style="font-weight: bold;">0</div>			21. HSR Corridor ID (2 char.)		
22. County Map Ref. No. (max. 10 char.)			23. Latitude (max. 10 char., nn.nnnnnn) <div style="font-weight: bold;">42.10319</div>		
24. Longitude (max. 11 char., nnn.nnnnnn) <div style="font-weight: bold;">-088.70964</div>			25. Lat/Long Source <input type="checkbox"/> Actual <input checked="" type="checkbox"/> Estimated		
26. Is There an Adjacent Crossing With a Separate Number? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Provide Number _____ (7 characters)					

27. PRIVATE CROSSING INFORMATION

27.A. Category (check one) <input type="checkbox"/> Recreational <input type="checkbox"/> Farm <input type="checkbox"/> Residential		27.B. Public Access <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		27.C. Signs/Signals <input type="checkbox"/> None <input type="checkbox"/> Signs Specify (max. 15 char.) _____ <input type="checkbox"/> Signals Specify (max. 15 char.) _____	
28.A. Railroad Use (max. 20 char.)			29.A. State Use (max. 20 char.)		
28.B. Railroad Use (max. 20 char.)			29.B. State Use (max. 20 char.)		
28.C. Railroad Use (max. 20 char.)			29.C. State Use (max. 20 char.)		
28.D. Railroad Use (max. 20 char.)			29.D. State Use (max. 20 char.)		
30. Narrative (max. 100 char.)					
31. Emergency Contact (Telephone No.) <div style="font-weight: bold;">(800)-995-7908</div>		32. Railroad Contact (Telephone No.) <div style="font-weight: bold;">(800)-995-7908</div>		33. State Contact (Telephone No.)	

MUST COMPLETE REMAINDER OF FORM FOR PUBLIC VEHICLE CROSSINGS AT GRADE

Part II: Railroad Information

1. Number of Daily Train Movements			
1.A. Total Trains <div style="font-weight: bold;">4</div>	1.B. Total Switching Trains <div style="font-weight: bold;">0</div>	1.C. Total Daylight Thru Trains (6 AM to 6 PM)	1.D. Check if Less Than One Movement Per Day <input type="checkbox"/>
2. Speed of Train at Crossing 2 A. Maximum Time Table Speed (mph) _____ 2 B. Typical Speed Range Over Crossing (mph) from _____ to _____			
3. Type and Number of Tracks Main _____ Other _____ If Other, Specify (max. 10 char.) _____			
4. Does Another RR Operate a Separate Track at Crossing? If Yes, Specify RR (max. 16 char.) <input type="checkbox"/> Yes <input type="checkbox"/> No		5. Does Another RR Operate Over Your Track at Crossing? If Yes, Specify RR (max. 16 char.) <input type="checkbox"/> Yes <input type="checkbox"/> No	